

REPORT TO CITY CLERK
SPECIAL DESIGNATED LICENSE APPLICATION

Russ #838

AZ-092607

☒ Police
☐ City Attorney
☐ Bureau of Fire Prevention
☐ Health Dept.

DATE: 08/13/02

RETURN BY: 09/14/02

CATERER: XX

NON-CATERER:

APPLICANT: EMPYREAN BREWING COMPANY

APPLICANT'S ADDRESS: 729 Q STREET

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE : 7TH STREET FROM Q TO P AND P ST FROM 7TH TO 8TH STS.

DATE(S) OF EVENT: SEPTEMBER 20 AND SEPTEMBER 21ST

TIME(S) OF EVENT : SEPTEMBER 20: 4PM TO 1 AM
SEPTEMBER 21: 8AM TO 1 AM

TYPE OF EVENT: OKTOBERFEST IN THE HAYMARKET

DETAILS ON ATTACHED APPLICATION.

RECOMMENDATION OF APPROVAL OR DENIAL

☒ APPROVED

CONDITIONS _____

☐ DENIED

REASON(S) FOR _____


Signature

8-15-02
Date

(If needed, use back for additional space)

PUBLIC HEARING BEFORE COUNCIL: 9/9/02

(SDLRPT.JER)

850
A2-092607

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

- ☐ All Applications must be received in the Commission Office 10 working days (excluding holidays) prior to the date of the event
☐ Complete and return THE ORIGINAL WITH A DUPLICATE to the Nebraska Liquor Control Commission
☐ A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day
☐ LOCAL APPROVAL must be included with this application
☐ A Signed Statement from Local Police Chief or County Sheriff (question #12)
☐ NON PROFIT CORPORATION MUST include a letter from the IRS declaring that the corporation is exempt from payment of federal income taxes, or a copy of the corporation's federal income tax return, as filed with the IRS, or a statement (Page 3) signed by an officer of the corporation declaring that the copy of the tax return is a true and correct copy as filed with the IRS

1. Type of Beverage(s) to be served: ☒ Beer ☒ Wine ☐ Distilled Spirits
2. Status of the Applicant (check one) Public
☐ Municipal ☐ Political ☐ Fine Arts ☐ Fraternal ☐ Religious ☐ Charitable ☒ Retail ☐ Service
Corporation Corporation Museum Corporation Corporation Corporation Licensee Corporation
3. Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number
(City, State, County Number, Zip Code) And Class (Example C/K) LK 20428

Empyrean Brewing Co. 429 Q Street 68508

4. Address or location of premises to be covered by license, (City, County Number, Zip Code)

7th and P Streets Lincoln, Lancaster (2) 68508

5. Is this PREMISE currently licensed under the Nebraska Liquor Control Act? ☐ YES ☒ NO

6. Name and Address of owner or lessee and name of principal occupant of the premises for which the license is requested.

City of Lincoln

7. Please list the name and telephone number of the primary event supervisor, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. Supervisor must sign on page 2.

Scott Miller 434-5980

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption)

Sept 20, 21st 2002

PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:

9. Time(s) of event (example 8am to 1am, this is considered one day)

9/20 4pm to 1am

FROM: 9/21 8am TO: 1am

10. Describe the Type of Activity to be carried on during the time period for which the license is requested.

Festival and Live music OKTOBERFEST in the Haymarket

11. Provide an estimated number of attendees at this event 5,000. If the number of attendees is over 250 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

12. PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER IS APPLICABLE, THAT LOCAL LAW ENFORCEMENT HAS BEEN INFORMED IN ADVANCE OF THIS EVENT, AND IF THEY ARE AWARE OF ANY REASON THE EVENT SHOULD NOT OCCUR.

13. List the number of SDL's that you have applied for at this specific location in the last six months. 0

CONTINUE ON BACK

NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT

14. Description of the premises: ☐ Inside Building ☒ Outdoor Area

Dimensions of area to be covered by license: city x Street. Please draw in the space provided below, the area where liquors will be sold and consumed. LENGTH WIDTH (In feet)

* Attached map *

If outdoor area, how will premises be separated from areas open to the general public? ☒ Fence ☐ Tent ☐ Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits?.....☒ YES ☐ NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children?.....☐ YES ☒ NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.

Empire Ales (20420), K & Z Distributing (+b d), Kevin Meirs Imports (+b d), J. Finnigans (+b d)

18. Will the premises to be covered by the license comply with all Nebraska sanitation laws?.....☒ YES ☐ NO

19. Are there separate toilets for both men and women?.....☒ YES ☐ NO

20. Other information or requests by the applicant:

21. Will there be any games of chance operating during the event? ☐ YES ☒ NO

NOTICE: Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

22. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign here Scott Miller President 8-7-02
Authorized Representative/Applicant Title Date

sign here N/A _____ _____ _____
Supervisor Title Date

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

In Compliance with ADA, this form is available in other formats for persons with disabilities.

A ten day advance period is requested in writing to produce the alternate format.

Special Designated License Application
Supplemental Form

CITY USE ONLY

The Special Designated License process is not intended to be used as a vehicle to expand the existing licensed premise.

Name of the Event: OKtoberfest in the HoymarktApplicant and Sponsoring Organization or Person (if applicable): Empyrean Ales
(Scott Miller)Date of the Event: 9/20 - 9/21/02 Time of the Event: 9/20 : 4 PM - 1 AM
9/21 : 8 AM - 1 AMHas the applicant applied for, and received liquor liability insurance? ☒ Yes ☐ NoNumber of persons expected to attend: 5000 Number of persons under 21 expected: 1,000 Is the event open to the public? ☒ Yes ☐ NoHow will you ensure that minors will not be served or consume beverages containing alcohol? attachedWill food be served? ☒ Yes ☐ No If yes, please list food to be served: Lazio's, Buzzard
Billar's, Lolo's, Old ChicagoWill non-alcoholic beverages be served? ☒ Yes ☐ No If yes, please list non-alcoholic beverages to be served: Water, Pepsi productsPlease identify the beverages containing alcohol that will be served: ☒ wine ☒ beer
☐ distilled spirits Will this be a cash or complimentary bar? ☒ Cash ☐ complimentaryWho will serve the beverages containing alcohol? Empyrean Ales and Zoo Bar Staff
Have the designated servers received responsible beverage service training? ☒ Yes ☐ NoWill there be a charge for admission? ☒ Yes ☐ NoIn the last twelve months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? ☐ Yes ☒ NoIf so, please explain _____



OKTOBERFEST IN THE HAYMARKET

September 20-21, 2002

Special Designated License Information

11. Steps to prevent access of alcoholic beverages to underage persons

We will have 12 off-duty uniformed officers backing up approximately 40 paid staff that will handle ID, wrist banding, crowd control and entrance/exit from the event. Signs will be posted with proper ID dates and notices. Minors will not be permitted without parent/guardian after 8:00 p.m.

14. Description of covered premises

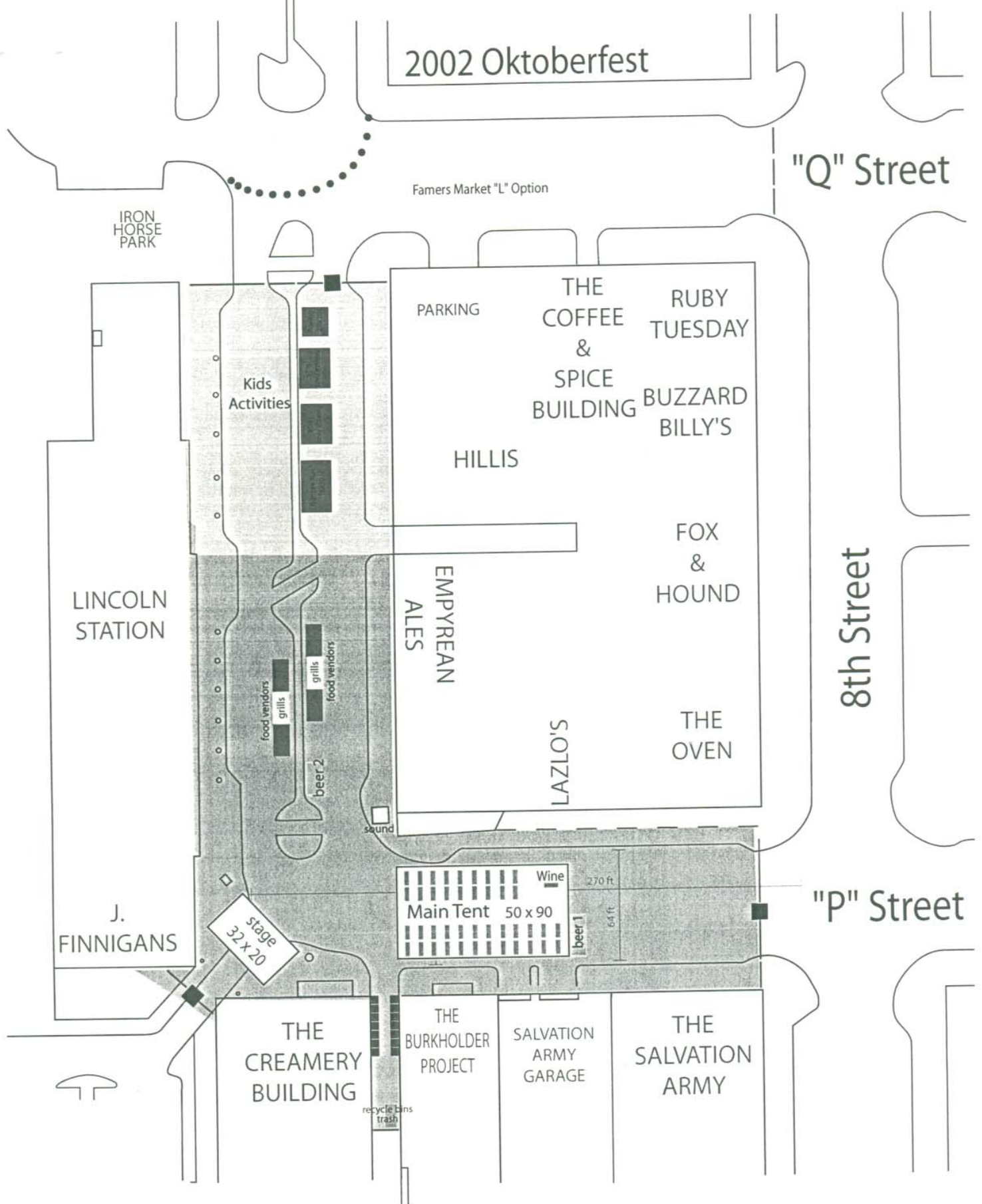
Friday, September 20th

4:00 p.m. to 1:00 a.m. 7th Street from Q to P Streets (62' x 382') and P Street from 7th to 8th Street (60' x 270'). Perimeter of area to be secured by building structures and appropriate fencing as indicated on site-plan.

Saturday, September ^{21st}~~20th~~

8:00 a.m. to 1 a.m. 7th Street from Q to P Streets (62' x 382') and P Street from 7th to 8th Street (60' x 270'). Perimeter of area to be secured by building structures and appropriate fencing as indicated on site-plan.

2002 Oktoberfest



REPORT TO CITY CLERK
SPECIAL DESIGNATED LICENSE APPLICATION

846

A2-092617

DATE: 08/13/02

☒ Police
☐ City Attorney
☐ Bureau of Fire Prevention
☐ Health Dept.

RETURN BY: 08/21/02

CATERER: XX

NON-CATERER:

APPLICANT: FAMOUS DAVES

APPLICANT'S ADDRESS: 2750 PINE LAKE ROAD

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE : 1625 H STREET,
GOVERNOR'S MANSION YARD.

DATE(S) OF EVENT: SEPTEMBER 7, 2002

TIME(S) OF EVENT : 2 pm to 5 pm

TYPE OF EVENT: PRE-GAME SOCIAL EVENT

DETAILS ON ATTACHED APPLICATION.

RECOMMENDATION OF APPROVAL OR DENIAL

☒ APPROVED

CONDITIONS _____

☐ DENIED

REASON(S) FOR _____


Signature

(If needed, use back for additional space)

8-15-02
Date

PUBLIC HEARING BEFORE COUNCIL: 8/26/02

(SDLRPT.JER)

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

- ☐ All Applications must be received in the Commission Office 10 working days (excluding holidays) prior to the date of the event
- ☐ Complete and return THE ORIGINAL WITH A DUPLICATE to the Nebraska Liquor Control Commission
- ☐ A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day
- ☐ LOCAL APPROVAL must be included with this application
- ☐ A Signed Statement from Local Police Chief or County Sheriff (question #12)
- ☐ NON PROFIT CORPORATION MUST include a letter from the IRS declaring that the corporation is exempt from payment of federal income taxes, or a copy of the corporation's federal income tax return, as filed with the IRS, or a statement (Page 3) signed by an officer of the corporation declaring that the copy of the tax return is a true and correct copy as filed with the IRS

1. Type of Beverage(s) to be served: ☒ Beer ☐ Wine ☒ Distilled Spirits

2. Status of the Applicant (check one)
☐ Municipal Corporation ☐ Political Corporation ☐ Fine Arts Museum ☐ Fraternal Corporation ☐ Religious Corporation ☐ Charitable Corporation ☒ Retail Licensee ☐ Service Corporation

3. Name and Address of Corporation, Organization or Licensee obtaining license. If licensee, give license number and Class (Example C/K) IK 45923
 (City, State, County Number, Zip Code)

Famous Dave's
2750 Pine Lake Road Lincoln NE 68516

4. Address or location of premises to be covered by license, (City, County Number, Zip Code)
1025 H. St. Lincoln NE 68508

5. Is this PREMISE currently licensed under the Nebraska Liquor Control Act? ☐ YES ☒ NO

6. Name and Address of owner or lessee and name of principal occupant of the premises for which the license is requested.
State of Nebraska - 1425 H. St. Lincoln, NE 68508

7. Please list the name and telephone number of the primary event supervisor, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. Supervisor must sign on page 2.
9/7/02 Chuck LeCorone and John 421-3634

8. DATE(S) OF EVENT (If a Sunday, attach local Sunday Sales Ordinance and hours of consumption.)
9-7-02

PLEASE INDICATE AN ALTERNATE DATE OR LOCATION IN THE EVENT OF BAD WEATHER:
none

9. Time(s) of event (example 8am to 1am, this is considered one day)
 FROM: 2pm TO: 5pm

10. Describe the Type of Activity to be carried on during the time period for which the license is requested.
NE Dist Economic Development / Social Event Pre-Game

11. Provide an estimated number of attendees at this event 500. If the number of attendees is over 250 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

12. PLEASE ATTACH A SIGNED STATEMENT FROM YOUR LOCAL POLICE CHIEF OR COUNTY SHERIFF, WHICHEVER IS APPLICABLE, THAT LOCAL LAW ENFORCEMENT HAS BEEN INFORMED IN ADVANCE OF THIS EVENT, AND IF THEY ARE AWARE OF ANY REASON THE EVENT SHOULD NOT OCCUR.
ON FILE - Per John Ruff City Clerk

13. List the number of SDL's that you have applied for at this specific location in the last six months.

CONTINUE ON BACK

NEBRASKA LIQUOR CONTROL COMMISSION
APPLICATION FOR SPECIAL DESIGNATED LICENSE
UNDER NEBRASKA LIQUOR CONTROL ACT

AUG - 5 2002

14. Description of the premises: ☐ Inside Building ☒ Outdoor Area Covered in Tent
Dimensions of area to be covered by license: 258.7 x 149.5. Please draw in the space provided below, the area where
liquors will be sold and consumed. LENGTH WIDTH (In feet)

Entire fenced in yard - Governor's mansion

If outdoor area, how will premises be separated from areas open to the general public? ☒ Fence ☐ Tent ☐ Other (if other, please explain)

15. Is the premises to be covered by the license located within the city/village limits? ☒ YES ☐ NO

16. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? ☒ YES ☐ NO

17. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number.

Wholesale Distributors - sold at retail

18. Will the premises to be covered by the license comply with all Nebraska sanitation laws? ☒ YES ☐ NO

19. Are there separate toilets for both men and women? ☒ YES ☐ NO

20. Other information or requests by the applicant:

21. Will there be any games of chance operating during the event? ☐ YES ☒ NO

NOTICE: Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law. There are no exceptions for Non Profit Organizations. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

22. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign
here

[Signature]
Authorized Representative/Applicant

Title

Date

Catering Manager 7/30

sign
here

[Signature]
Supervisor

Title

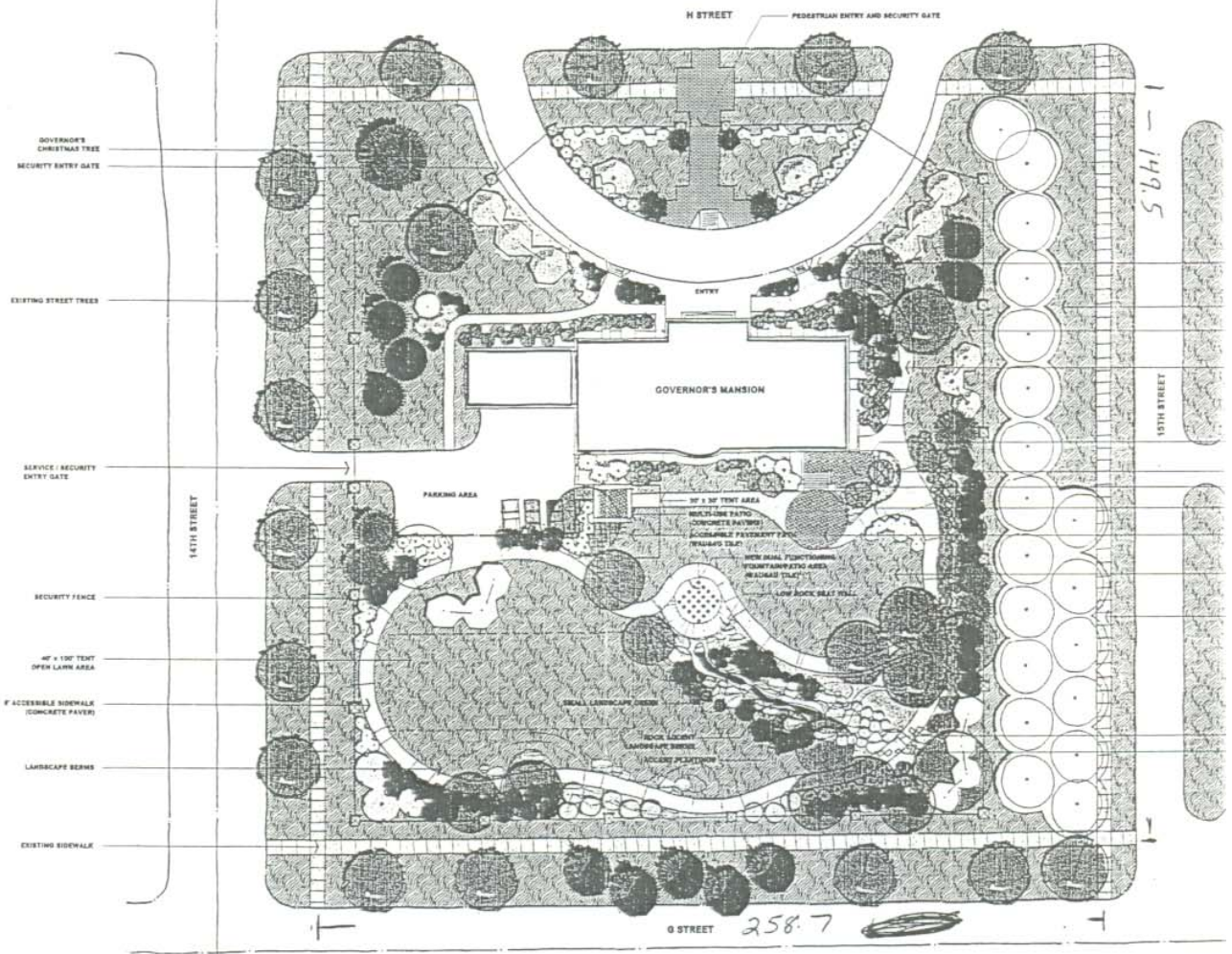
Date

Gen. Mgr. 7/30/02

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

In Compliance with ADA, this form is available in other formats for persons with disabilities.

A ten day advance period is requested in writing to produce the alternate format.



SPECIAL DESIGNATED LICENSE APPLICATION SUPPLEMENTAL FORM

AUG -5 2002

NEBRASKA LIQUOR
COMMISSION

The Special Designated License process is not intended to be used as a means to expand the existing licensed premise

Name of Event: Pre Game Social
Ne Dept. of Economic Development.

Applicant and Sponsoring Organization or Person (if applicable): James Davis

Date of Event: 9/17/02 Time of Event: 2-5pm

Has the applicant applied for and received liquor liability insurance? ☒ Yes ☐ No

Number of persons expected to attend: 500 Number of persons under 21 expected:
Is the event open to the public? ☐ Yes ☒ No

How will you ensure that minors will not be served or consume beverages containing alcohol:

No minors will be attending the event. Location
protected by the State patrol

Will food be served? ☒ Yes ☐ No If yes, please list food to be served: Pigs/chicken
Bans, Cole Slaw - nuggets Desserts

Will non-alcoholic beverages be served: ☒ Yes ☐ No If yes, please list non-alcoholic beverages to be served: TEA, lemonade, water

Please identify the beverages containing alcohol that will be served: ☐ Wine ☒ Beer
☒ Distilled Spirits

Will this be a cash or complimentary bar? ☐ Cash ☒ Complimentary

Who will serve the beverages containing alcohol? James Davis Bartenders

Have the designated servers received responsible beverage service training? ☒ Yes ☐ No

Will there be a charge for admission? ☐ Yes ☒ No

In the last 12 months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee? ☐ Yes ☒ No If so, explain:

PLEASE USE REVERSE TO PROVIDE A DRAWING

James Davis
Applicant's Signature
Catering Manager

9/29/02
Date

TENT INFORMATION

RECEIVED

AUG -5 2000

NEBRASKA LIQUOR
CONTROL COMMISSION

Please provide a drawing showing the following:

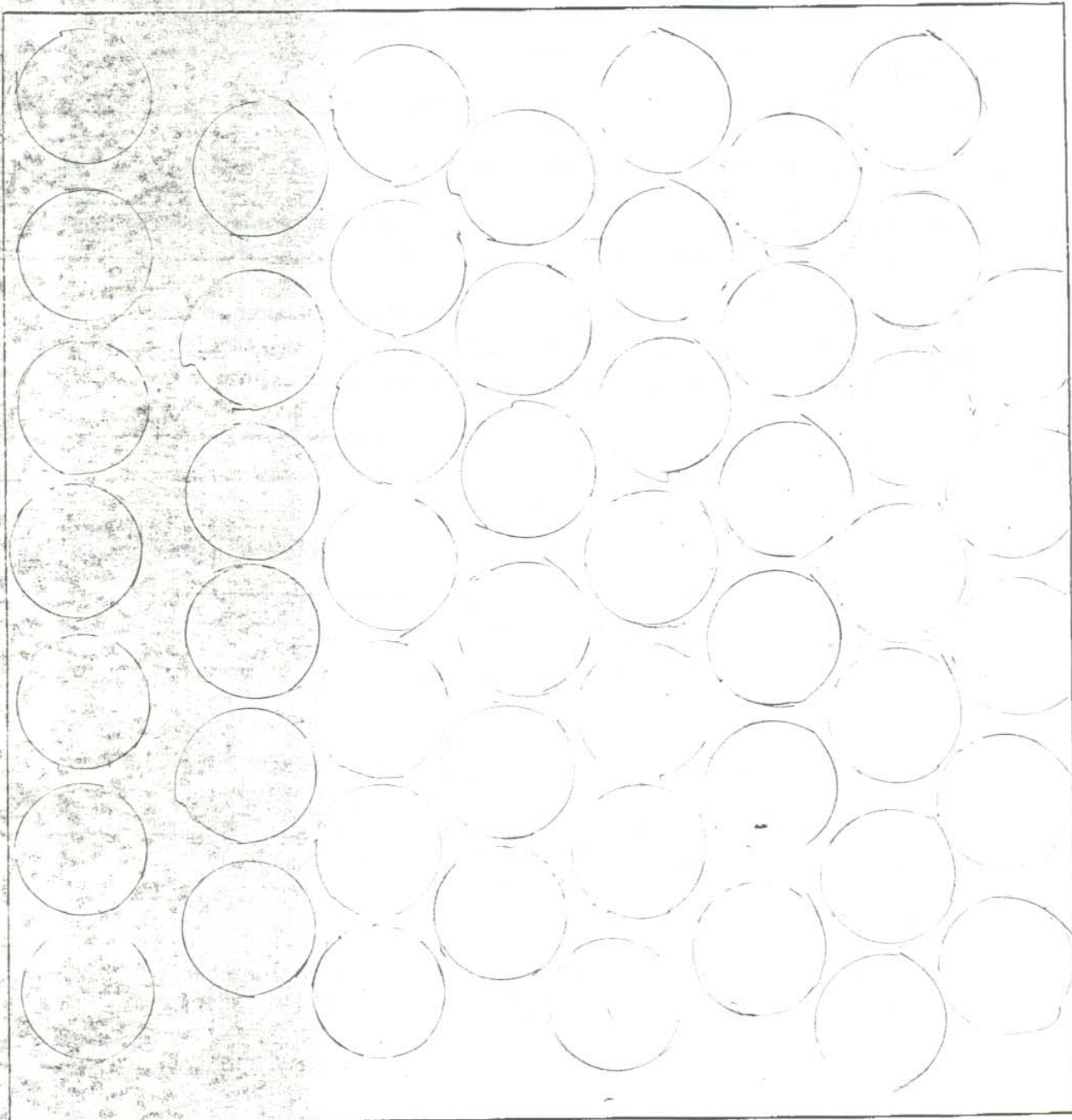
1. Number of Exits & Size.
2. Size & location of tent(s)
3. Size of area being used
4. Location of cooking equipment (if used)
5. Location of tables & chairs

Tent open all around.

40 x 100

(40 x 100) -

Cooking in separate tent.



USE THE ABOVE BOX FOR YOUR DRAWING